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Program

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The research objective of this 3-year study is to evaluate the effectiveness of a minimal contact internet-based behavioral therapy plus usual care (MCBT + UC) for controlling overweight in the USAF personnel using a controlled experimental comparison of usual care (UC). Subjects will include personnel who are 5lbs below their Maximum Allowable Weight (MAW) and heavier. Effectiveness of MCBT + UC will be compared to UC in terms of weight loss and percentage of subjects who are below their MAW. Outcomes will be measured at 6 and 12 months.

Recruitment began in June 2003 at Lackland AFB and in July 2003 at both Brooks City Base and Randolph AFB. Currently, 287 subjects have been recruited (147 in treatment group and 140 in usual care group). Both groups include approximately 50% men and women and an ethnic representation of 52% Caucasian, 26% African American, 16% Hispanic, 6% all others (Asian, Pacific Islander, Other). Mean age for subjects is 34.2 years and body mass index, 29.9. Recruitment of subjects will continue until September 2004. To date, approximately 60 subjects have completed the treatment program. Six-month follow-up assessments began in January 2004 and 12-month assessments are scheduled to begin in June 2004. Sufficient 6-month data has not been collected at this time to allow for meaningful analysis. Therefore, a report of progress in terms of results and significance is not available for this annual report.

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INTRODUCTION:

Maintaining healthy body weight is a critical part of readiness in the United States Air Force (USAF). The USAF has not escaped the same weight management problems that the US civilian population is experiencing. Therefore, the need for improving existing weight programs currently available to the USAF is of great importance and part of the mission of this study. The research objective of this 3-year study is to evaluate the effectiveness of a minimal contact behavioral therapy plus usual care (MCBT + UC) for controlling overweight in the USAF personnel using a controlled experimental comparison of usual care (UC). Subjects will include active duty personnel who are 5 lbs. below their Maximum Allowable Weight (MAW) and heavier. Effectiveness of MCBT + UC will be compared to UC in terms of weight loss and percentage of subjects who are below their MAW. Outcomes are measured at 6 and 12 months. The ultimate goal of this study is to provide an easily disseminated weight management treatment to any interested military installation.

BODY:

Since the initial annual report, the following tasks have been accomplished in months 13 to 24 of the grant period (as outlined in the original Statement of Work). Recruitment began in June 2003 at Lackland AFB and in July 2003 at both Brooks City Base and Randolph AFB. Currently, 287 subjects have been recruited (147 in treatment group and 140 in usual care group). Both groups include approximately 50% men and women and an ethnic representation of 52% Caucasian, 26% African American, 16% Hispanic, 6% all others (Asian, Pacific Islander, Other). Mean age for subjects is 34.2 years and body mass index, 29.9. Recruitment of subjects will continue until September 2004. A no-cost extension will be filed in early 2005 to allow time for 12-month follow-up assessments.

Due to a change in Air Force policy regarding weight and fitness in January 2004, modifications to recruitment methods for this study were required and a number of new recruitment methods were added to the original protocol, all such methods were IRB approved prior to implementation. These methods focused on the development and distribution of informational flyers used in both an electronic and paper format. These flyers have become our primary means of recruitment and have been successful in increasing our recruitment in the last 3 months. The flyers are distributed by the Physical Training Leaders (PTLs), who are responsible for administering annual fitness tests to each Active Duty member. The flyers are also distributed at each of the 2 classes required by Air Force policy for Active Duty members not meeting weight and fitness goals. Flyers are also made available at locations frequented by Active Duty personnel such as fitness centers.

Other updates include: a second research associate, Jodi Atkinson, was hired in June 2003; all members of the research staff completed training in Motivational Interviewing techniques and currently utilize this training in phone calls for treatment subjects; the website including the 24 weekly lessons and food/exercise/weight diaries are fully functioning and being used by treatment subjects; online databases used for data management are also fully functioning; data entry/management procedures for quality assurance including coding and a double entry checking system are being utilized by research staff.

To date, approximately 60 subjects have completed the treatment program. Six-month follow-up assessments began in January 2004 and 12-month assessments are scheduled to begin in June 2004. Sufficient 6-month data has not been collected at this time to allow for meaningful analysis. Therefore, a report of progress in terms of results and significance is not available for this annual report.

KEY RESEARCH ACCOMPLISHMENTS:

Internet-based weight management program has been developed and is currently being
utilized online by treatment subjects. Number of website logins by treatment subjects to
date is 5,597. The complete website platform includes 24 weeks of military related
weight and exercise content and online diaries for tracking food, weight, and exercise by
subjects.

REPORTABLE OUTCOMES:

We will continue recruitment of subjects until September 2004. Six-month follow-up assessments began in January 2004 and 12-month assessments are scheduled to begin in June 2004. Sufficient 6-month data has not been collected at this time to allow for meaningful analysis. Therefore, a report of outcome data is not available for this annual report

CONCLUSIONS:

We will continue recruitment of subjects until September 2004. Six-month follow-up assessments began in January 2004 and 12-month assessments are scheduled to begin in June 2004. Sufficient 6-month data has not been collected at this time to allow for meaningful analysis. Therefore, a report of progress in terms of results and significance is not available for this annual report

REFERENCES:

Literature reviews are conducted on a monthly basis. To date, no new information is available that would change the risk: benefit ratio of this study or any of its current treatment objectives.